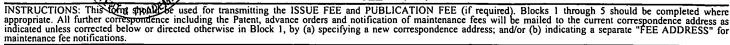
26-06-05

PART B - FEE(S) TRANSM

Complete and send this form together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

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41505

APPLICATION NO.

10/623,220

7590

04/27/2005

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FILING DATE

07/18/2003

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Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FSE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. (Depositor's name

Date FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.

MSFT-1787/303769 1

Donald David Karlov TITLE OF INVENTION: SYSTEMS AND METHODS FOR EFFICIENTLY DISPLAYING GRAPHICS ON A DISPLAY DEVICE REGARDLESS OF PHYSICAL ORIENTATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700		07/27/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	ָ י		
MONESTIME, MACKLY		2676		345-557000	• .		,
Change of correspondence address or indication of "Fee Address" CFR 1.363). Change of correspondence address (or Change of Correspondence address).		`	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
3. ASSIGNEE NAME ANI	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print or type)			
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will app Γa substitute	pear on the patent. If an assign for filing an assignment.	nee is identifi	ied below, the d	locument has been filed for
(A) NAME OF ASSIGN	IEE	(B) RESIDEN	CE: (CITY and STATE OR CO	UNTRY)		
Microsoft (Corporation		Red	lmond, Washington	01 FC:150 02 FC:150 03 FC:800		1400.00 OP 300.00 OP 15.00 OP
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the p	patent): 🗖 Individual 🕰 C	orporation or	other private gre	oup entity Government
4a. The following fee(s) are				Fee(s): Deficiencies			
XX Issue Fee			XX A check	in the amount of the fee(s) is er	closed. cha	rged to	Dep. acct. 23-30
	small entity discount permitte	d)	Payment	by credit card. Form PTO-203	3 is attached.	Ū	•
XX Advance Order - # o	Order - # of Copies5						
5. Change in Entity Status	(from status indicated above)					
a. Applicant claims S	MALL ENTITY status. See 3	37 CFR 1.27.	b. Applie	cant is no longer claiming SMA	LL ENTITY	status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Issu Publication Fee (if required) words of the United States Par	e Fee and Publica vill not be accepted nt and Trademark	tion Fee (if and if and	ny) or to re-apply any previous e other than the applicant; a reg	y paid issue i istered attorn	fee to the applica	ation identified above. the assignee or other party in
Authorized Signature	XZH		`	Date J	une 3,	2005	

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